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October 7, 2005

To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818-493-2251
Attention: TECHNOLOGY CENTER 3700 Examiner: Unassigned Art Unit: 3762	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221
Telecopier: 571-273-8300	Telecopier: 818/362-4795
RE: REQUEST FOR RECONSIDERATION App. No.: 10/039,743 Filed: 10/26/2001 Docket No.: SJ1-026US Confirmation No.: 9121	Number of pages being sent: <u>4</u> (including cover page)

OCT 07 2005

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Balakrishnan Shankar et al.	Confirmation No.:	9121
Serial No.:	10/039,743	Examiner:	F. Oropeza
Filed:	10/26/2001	Art Unit:	3762
Docket No.:	SJ1-026US		
For:	IMPLANTABLE CARDIAC THERAPY DEVICE WITH DUAL CHAMBER CAN TO ISOLATE HIGH-FREQUENCY CIRCUITRY		

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

- ☒ Request for Reconsideration
☒ Transmittal Letter, Fee and Cert. of Mailing

CALCULATION OF FEES						
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE	\$ FEE
A	TOTAL CLAIMS FEE	6	23	0	X \$ 50	\$ 0
B	INDEPENDENT CLAIMS FEE**	1	4	0	X \$200	
C	MULTIPLE- DEPENDENT				X \$ 360	
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,680; 5-mon: \$2,160					0
E	ADDITIONAL FEES (i.e., Surcharge – Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.) Specify:					
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D, and E)					\$0**

☒

Charge Deposit Account No. 16-0068
the amount of

\$0**

A copy of this letter is
enclosed.

PATENT

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068

X Any additional filing fees required under 37 CFR 1.16.

X Any patent application processing fees under 37 CFR 1.17.

X The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068

X Any patent application processing fees under 37 CFR 1.17.

X Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date:

10-7-05

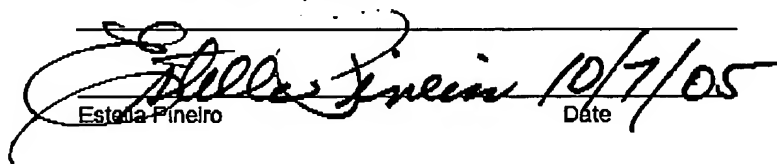


Peter A. Nichols, Attorney for Applicants
Reg. No. 47,822
818-493-2323

CUSTOMER NUMBER: 36802

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:

October 7, 2005



Estelita Pineda Date 10/7/05

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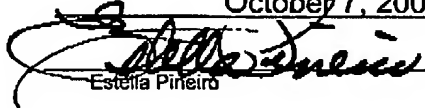
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REQUEST FOR RECONSIDERATION

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Alexandria, VA 22313-1450

October 7, 2005


Estella Pineiro
Date 10/7/05

Dear Sir:

In the Office Action, mailed September 14, 2005, the Examiner has identified four distinct inventions, and has required election of one of those inventions. Applicants hereby elect the invention of Group I, corresponding to Claims 2, 3, 5-7 and 9. This election is made without traverse.

Respectfully submitted,

10-7-05

Date



Peter A. Nichols, Reg. No. 47,822
Attorney for Applicant(s)
818/493-2200

CUSTOMER NUMBER: 36802